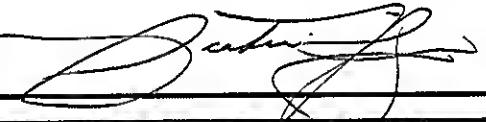
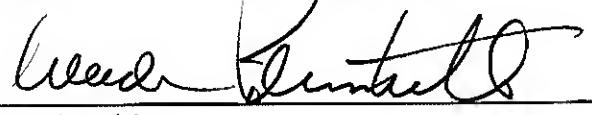


Report Type:	New Entrant
Year (Annual Report only):	
Date of Appointment/Termination:	September 17, 2017



Executive Branch Personnel Public Financial Disclosure Report (OGE Form 278e)

Filer's Information				
Last Name	First Name	MI	Position	Agency
King	Thomas	P	Public Affairs Specialist	OPM
Other Federal Government Positions Held During the Preceding 12 Months:				
None				
Name of Congressional Committee Considering Nomination (Nominees only):				
None				
Filer's Certification - I certify that the statements I have made in this report are true, complete and correct to the best of my knowledge:				
Signature: 		Date: 10/1/2018		
Agency Ethics Official's Opinion – On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments below)				
Signature: 		Date: 10/1/18		
Other Review Conducted By:				
Signature:		Date:		
U.S. Office of Government Ethics Certification (if required):				
Signature:		Date:		
Comments of Reviewing Officials:				

Instructions for Part 1

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name				Page Number		
Part 1: Filer's Positions Held Outside United States Government						
#	Organization Name	City/State	Organization Type	Position Held	From	To
1.	WCBI-TV	Columbus, MS	Television Station	Reporter/Anchor	10/2016	9/2018
2.	Swim Columbus	Columbus, MS	Swim Team	Assistant Coach	04/2015	05/2016
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						

Instructions for Part 2

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name					Page Number
Part 2: Filer's Employment Assets and Income					
#	Description	EIF	Value	Income Type	Income Amount
1.	WCBI-TV			Salary	42,750
2.	WCBI-TV Profit Sharing Plan; Manning & Napier Pro-Blend Mod Term Fund	Y	\$1,001 - \$15,000	Dividends	\$201 - \$1,000
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

Instructions for Part 3

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name			Page Number	
Part 3: Filer's Employment Agreements and Arrangements				
#	Employer or Party	City/State	Status and Terms	Date
1.	WCBI-TV	Columbus, MS	I have a profit sharing plan with this former employer. However, neither former employer nor I contribute to the plan any longer.	10/2016
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

Instructions for Part 4

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name			Page Number
Part 4: Filer's Sources of Compensation Exceeding \$5,000 in a Year			
#	Source Name	City/State	Brief Description of Duties
1.	WCBI-TV	Columbus, MS	Reporter and news anchor for this television station.
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Instructions for Part 5

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number

Part 5: Spouse's Employment Assets and Income

#	Description	EIF	Value	Income Type	Income Amount
1.	None				
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

Instructions for Part 6

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name					Page Number
Part 6: Other Assets and Income					
#	Description	EIF	Value	Income Type	Income Amount
1.	None				
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

Instructions for Part 7

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name			Page Number	
Part 7: Transactions				
#	Description	Type	Date	Amount
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

Instructions for Part 8

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name						Page Number
Part 8: Liabilities						
#	Creditor Name	Type	Amount	Year Incurred	Rate	Term
1.	Nelnet	Student Loans	\$15,001 - \$50,000	2014	4.4%	15 years
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

Instructions for Part 9

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number

Part 9: Gifts and Travel Reimbursements

#	Source Name	City/State	Brief Description	Value
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				